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ABSTRACT

Effective response by community service agencies to clientele needs is an essential part of community development. A personnel screening instrument, a model for predicting different types of adaptation to occupational stress, is suggested as a means of increasing the responsiveness of service agencies to their local communities. Proposing the use of the model as a screening instrument stems from the realization that agency efforts to redefine staff roles to better serve community needs will produce stress for their personnel. The model has three major explanatory components: personal evaluation of the occupational role by the incumbent; the kinds of social support one receives through primary and secondary contacts, which tend to challenge or reinforce the incumbent; and the investment of personal resources which an individual has made in the occupation. The combination of responses to all the variables in the model can be used to predict adaptation of role behavior and thus to assess an individual's capacity to cope adequately with the stress of a changing occupational role. An empirical test of the model has provided support for the validity of its constructs. (NH)

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INCREASED SERVICE DELIVERY AND ADAPTATION TO OCCUPATIONAL STRESS

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This paper focuses on community development and the responsiveness of community service agencies to clientele needs. A personnel screening instrument is suggested as a means of increasing the responsiveness of service agencies to their local communities. The screening instrument is a model for predicting different types of adaptation to occupational stress. The proposed application of the model as a screening instrument stems from the realization that agency efforts at redefinition of staff roles in order to better serve community needs will produce stress for their personnel. Insight into how individuals might adapt to this stress will be most helpful for hiring and other decisions dealing with the allocation of job responsibilities.

Community development (C.D.) has been viewed from a number of different perspectives. Batten (1957:223), Horowitz (1966:272-275), Nelson, Ramsey and Verner (1960:416), Ponsioen (1965:15-16), Poston (1958), Ross (1958:4-13) and Sanders (1958:4) represent only a few of the many contributions to a definition of community development. As Sanders (1958) has stated, some social scientists think of community development as a process, others think of community development as a method, and still others think of it as a program. Acknowledging that processes and programs are essential to community development, our focus, is, for a number of reasons, on objectives and methods used in moving toward those objectives.

Emphasis upon programs and processes tends to lose sight of people, while objectives and methods more consistently and directly take into consideration their welfare. The results of a wrong focus speak for themselves. An over-emphasis upon program and process tends to make them ends in themselves rather than means, and has all too often resulted in a failure to do the very thing they were intended to do. Unless community oriented efforts result in such things as rising levels of housing, health care, food supplies, recreation, access to respected roles or other goods and services necessary for psychological and physiological health, effective development has simply not occurred.

Although individuals are the victims of aborted community development efforts, community development itself is not an individual problem. While community development results can be measured most meaningfully at the individual level, community development efforts are a collective phenomenon. This means that community development is essentially a social problem--a problem of allocation of goods, services, power, prestige, and opportunities of various kinds.

One valid approach to considering problems of development is to examine communities which have been unsuccessful in improving the welfare of their citizens. These are communities, for example, who generally exhibit an insufficient number of high paying jobs to support most of the population above the poverty level. They exhibit a low tax base relative to other areas, a shortage of quality housing, and a general paucity of services (Stockdale, 1972).

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Local governments and public agencies serving these communities demonstrate a greater than average unresponsiveness to needs. This appears to be due in part to the fact that the service needs of the communities conflict with a low tax ideology. A low tax ideology is sufficient in itself to have a powerful impact upon policy formulation and the delivery of services. Add to that, however, the fact that many local leaders and service agency personnel blame the victims rather than the circumstances which lead to their plight (Ryan, 1972), and it is inevitable that both the quality and the availability of services suffer immensely.

A number of development strategies are possible to remedy the situation. The goals of such strategies will include: (1) increasing the income of local residents through expanded employment, higher wage scales and transfer payments, (2) improving the supply and quality of goods and services, and (3) increasing the openness and responsiveness of local institutions and agencies (Stockdale, 1972). The first-cited goal is crucially significant for community development, since achieving increases in income virtually necessitates structural change, which, in the long run, provides the greatest challenge for community development efforts.

Achievement of the two other goals, although greatly affected by structural change, depends heavily on those individuals who are responsible for delivering goods and services to the community. This is the particular problem which this paper addresses, for improvement in the supply and quality of goods and services, and increasing the openness and responsiveness of local institutions and agencies demands a willingness to accept changing roles for individuals assuming such responsibilities. It means maximizing the use of those who have the potential to deliver particular goods and services to meet specific needs.

Let us take a case in point. Health care needs have come to be regarded as a pressing community problem. The development of personnel to meet the new demands has thus become a major concern. So urgent are the demands and so scarce the personnel that many communities face a health care crisis.

Meanwhile, changes have been taking place in the roles of the professions that have both intensified the problem and offered the possibility of some relief. The changing role of the physician has largely intensified the problem. Physicians are becoming less and less available for house and office calls. They are moving toward increased specialization and more hospital based activities with the inevitable consequence that primary care needs of many people are increasingly unmet (Brown, 1971:489).

The changing role of the nurses, however, offers at least the potential of some relief from the crisis. A new role, both extended and expanded, is now emerging for the nurse, though it is encountering resistance as it comes into being. Insofar as the nurse's role is extended, he/she is assuming more of the primary case type tasks, previously the exclusive domain of the family physician. Insofar as the nurse's role is expanded, he/she is exercising more independent judgment and making more decisions in the care of people. A specific indication that this new role is indeed emerging is the recent trend toward increased education for nurses at the university

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level, with special curriculum emphasis on the psychosocial as well as the physical aspects of health.

One cannot ignore the resistance, however. In a recent study (Lysaught, 1971:59) doctors and administrators were both asked to respond to the idea that nurses might well devote more of their time and effort to "Total Family" mental and physical health maintenance. Only 46 percent of the doctors responded favorably to such a suggestion. Even fewer administrators (42%) appeared to like the idea. Yet both doctors and administrators gave strong favorable endorsement to a statement which cast the nurse in the traditional role of service in a hospital.

It is obvious, then, that though this newly emerging role might provide a way of maximizing the potential of a professional group in meeting a pressing community need, the new role is going to produce some stress for those willing to adopt it. This stress will issue first from the professional and hierarchical instability of the new role. It will be initially unacceptable not only to the majority of physicians and administrators, but probably to many consumers, and even to nurses themselves. It will be stressful, too, because it is ambiguous when contrasted with the clearly defined feminine role of nurturance and care which so long characterized the nurse. How will particular nurses manage the stress produced by what is essentially a totally new situation? That is the question to which we are directing our efforts. But to further demonstrate the need for what we are here attempting, let us take another community service occupation and highlight the stress which is being produced by another changing occupational role.

Extension service workers in many states are being asked to broaden their traditional roles and responsibilities to include more community development activities. They are being asked to function as organizers, facilitators, and resource managers for a broad range of C.D. activities while maintaining a high level of commitment, supported by legal and political mandates, to serve their traditional programs and client groups.

In contrast to the case of the nurse, the motivating force for modification of the extension worker's role emanates not from client groups at the local community level or from extension workers themselves, but rather from regional, state and federal extension service staffs--a good example of what some observers have labeled a top-down approach. Communities are not demanding a changing, community development oriented role for their local extension agents. The average citizen views extension almost exclusively within traditional program lines. Even citizens who participate in community development activities may not generally view the extension office as having community development responsibilities. Moreover, community development efforts are frequently viewed by extension workers as an "add-on" program supplementing rather than complementing their traditional roles and responsibilities. The end result is that workers feel themselves faced with a very serious dilemma of time management.

Undoubtedly, some extension workers will adapt more easily to community development involvement than others. Some will question their own

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ability or the ability of the organization to support a community development program. Others will fear being caught in the middle of a controversial or explosive issue such as land use planning and zoning. A worker's tenure on the job or his perception of his job perhaps will be most critical factors. Many workers will feel that any intensive C.D. oriented program distracts from traditional programs and responsibilities for which they were trained and hired, and which they enjoy doing. They will fear finding themselves unable to respond to the requests of their traditional client groups because of their community development involvement. They will not be against the idea of community development involvement, just against an expanded or intensive effort in that area.

It becomes essential, therefore, to be able to identify the type of individual who is able to adapt to an expanded or extended occupational role, and to identify the type of individual who is not able to make such an adjustment.

The question raised by this paper, then, is: "Why do some individuals in an occupational setting adapt to stress in one way, while others in the same group will follow quite another pattern?" This question has only recently been addressed systematically in a model developed by Schnabel and Koval.[1]

Prior to that time the two nearest approaches to the problem were: (1) those that dealt with the process of developing identification with an occupation (especially Becker and Carper, 1970), and (2) Robert Merton's typology of adaptations to structural stresses (1938:762-782). In both these cases, however, the approaches used were more suggestive for the problem than directly related to it.

The Mertonian typology of adaptations to stress was based upon the disjunction between cultural goals and institutionalized means. Different patterns of disjunctions between accepted goals and available means presumably produced different kinds of stress which led to the possibility of various forms of adaptation within broad collectivities. Attempts to become more specific about which individuals within these broad collectivities might be expected to behave in any predicted way called for further specification, as Merton himself recognized. He took refuge in "particular personality" and "particular cultural backgrounds" as explanatory variables in attempting to account for the actual behavior of individuals. So far as we know, however, no attempt was ever made to operationalize these "particulars".

Part of the reason why it was necessary for Merton to use an undefined and unspecified intervening variable was that his typology considered stress itself to be the causal variable. However, when one attempts to hold structural stresses constant and focus on individual behaviors, the former intervening variable becomes the independent variable. It is possible to conceptualize individuals adapting differently to stress when we

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[1] A manuscript is now in process.

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hold the stress constant. One may adapt attitudinally be continuing to "identify" with the occupation in spite of the stresses, or else inwardly reject the occupation and thereby become alientated from it. Behaviorally, one may adapt by either conforming to the new role expectations or by innovating in an ettempt to do something about the stress. In terms of status in the occupation, one may adapt to stress by quitting, or by continuing in the occupation in spite of the stress.

It is self-evident ther., when we attempt to hold structural stresses constant and focus on individual behaviors, that we must specify the "particularities" that would account for different kinds of adaptation. We must be able to explain why, for example, in reaction to similar occupational stress, some nurses will conform attitudinally or behaviorally to an extended-expanded role and others will become alienated or become innovative in an attempt to cope with stress, why some extension workers will conform to a newly prescribed community development role and others will quit.

The model proposed by Schnabel and Koval to explain differential adaptations to role stress in an occupational climate or setting has three major explanatory components:

A. Personal evaluation of the occupational role by the incumbent in that role, which will hereafter be abbreviated as simply "evaluation."

B. The kinds of social support one receives through primary and secondary contacts which tend to either challenge or reinforce the incumbent in his occupation, which will hereafter be abbreviated as "social supports."

C. The investment of personal resources which an individual has made in the occupation, which will hereafter be abbreviated as "investment".

1. The evaluation component consists of six dimensions:

   a. evaluation of the quality of incumbents of the occupation in terms of their potential for being respected role models.

   b. evaluation of the potential of the occupation for service to society.

   c. evaluation of the ideal personal life for incumbents of the occupation.

   d. evaluation of the ideal job role for incumbents of the occupation.

   e. evaluation of the potential of one's assigned task for personal self-fulfillment, and

   f. evaluation of one's personal fit for the occupation.

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Evaluation of an occupation, then, is an appraisal of the worth or merit of that occupation in terms of its legitimacy and effectiveness for society in general and for the individual himself. Both the goals and the activities of the occupation are subject to appraisal by the individual, since these are the functional equivalents of legitimacy and effectiveness.

2. The social supports component consists of three dimensions:
   a. social supports in organizational memberships
   b. social supports in work contacts, and
   c. social supports in leisure contacts.

The significance which "others" may have for the individual may take a variety of forms. Some combinations may actually facilitate deviance, while others may facilitate "normal" identity and behavior. The unique combinations of who is "inputing" to the individual are highly significant. Whole deviance theories have been proposed around the differential associations that an individual has which give opportunity for deviant behavior (Sutherland and Cressey, 1966; Cloward and Ohlin, 1960), the differential associations with others that tend to "contain" or constrain the individual (Voss, 1970:Ch. 19; Briar and Piliavin, 1965:35-45), and differential associations with others that tend to label the individual and push him toward a career of deviance (Wheeler and Cottrell, 1966; Lemert, 1951).

The point is sufficiently clear that it is vitally important with whom an individual is associated and the kinds of support he receives from them for his own subsequent behavior. The nature of his social supports and whether they be reinforcing, insulating, challenging or contradicting, may well determine the extent of his conformity or non-conformity.

The social supports that an individual experiences are simply "others" whose influence is felt through either secondary contacts (memberships, work contacts, leisure contacts) or primary contacts (family, close friends). Becker (1970:302) suggested that such structural conditions as physical isolation, organizational isolation, or differential group memberships could themselves result in a situation which enables an individual to discount opinions of those whom he once took seriously. In other words, on the basis of the type and frequency of the contacts one has, either within or without an occupational group, inference can be made as to whether these contacts are likely to be reinforcing and insulating or contradicting and challenging of one's occupational choice.

3. The investment component consists of four dimensions:
   a. time dimension, including the age of the individual and the amount of time already spent in the occupation.
   b. status dimension, including both the prejudice and the authority associated with the position occupied.
   c. rewards dimension
   d. educational dimension

The investment of personal resources that one has made in an occupation represents those things of value to the individual that would be lost

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by abandoning the occupation. Both Becker (1970) and Geer (1966) have already done some pioneering work in this area. Becker approached the subject in terms of what he called "side bets" while Geer termed the same sort of thing "valuables" or the potentials for loss which militate against abandoning a particular role. Geer (1966:31-47) offers the following list as suggestive of the kinds of things that might militate against abandoning a particular role: specialized training, generalized social prestige, loss of face following an exhibition of being unable to continue at one's work, perquisites of the job, rewarding personal involvements, promotional opportunities, and prestige among colleagues. Whether each of the valuables listed by Geer represent a separate dimension of investment of whether some of them can be lumped together into broader dimensions is one of the things that needs further examining. As a minimum the four above mentioned dimensions are proposed.

In its general form, then, a tabular presentation of what is involved in the model is as follows:

Table 1

	INDEPENDENT VARIABLES (in degrees)			DEPENDENT VARIABLES (as tendencies)		
	Evaluation of Occupation	Social Supports	Institutional Investment	Attitudinal Identification	Behavior in Role	Status in Role
1.	High	High	High	Commitment	Conformity	Continuation
2.	High	High	Low	Commitment	Conformity	Abandonment
3.	High	Low	High	Commitment	Non-Conf.	Continuation
4.	High	Low	Low	Commitment	Non-Conf.	Abandonment
5.	Low	High	High	Alienation	Conformity	Continuation
6.	Low	High	Low	Alienation	Conformity	Abandonment
7.	Low	Low	High	Alienation	Non-Conf.	Continuation
8.	Low	Low	Low	Alienation	Non-Conf.	Abandonment

From the tabular summary it is evident that specific configurations of the independent variables may lead to specific patterns of adaptation. What is not necessarily obvious from the table is that each of the independent variables alone (apart from its place in the configuration) may not tell us as much about the dependent variables as does the particular combination of variables. For example, high evaluation may not necessarily lead to conformity or continuation, nor will low evaluation necessarily lead to innovation, or abandonment. However, as the tabular summary suggests, the three independent variables, in relation to the three dependent variables or tendencies, may differ in their predictive capacities. The patterns suggest that evaluation is the best for predicting commitment, social supports the best for predicting conformity, and investments the best for predicting continuation.

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The constructs of the model presented here were actually validated in an empirical study with Roman Catholic priests as a research case (Schnabel, 1973). Results of testing the model were overwhelmingly supportive of the validity of its constructs. The combined constructs did enable prediction of differential adaptation to occupational stress. The reduction in error achieved by use of the constructs was 56 percent for status adaptation, 71 percent for behavioral adaptation, and 81 percent for attitudinal adaptation. The uses of these constructs in such a model has been determined to be justified in the case of Roman Catholic priests. The use of these same constructs in tests with other occupational groups is now in process, and will determine their generalizability.

Ability or capacity to conform to a prescribed change in role behavior will vary among individuals within service organizational staffs. It becomes essential therefore, to be able to identify the type of individual who is able to make such an adjustment. We have discussed a model which we believe has promise for assessing an individual's capacity to cope adequately with the stress of a changing occupational role. Community service agencies which are attempting to improve the quality of their service and become more responsive to the community development needs of their clientele should find this model a useful tool for screening personnel according to expectations of new occupational roles necessary for the achievement of community development goals.

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